

# A STRONG RESPONSE TO THE SELECT COMMITTEE'S MEN'S HEALTH INQUIRY

August 3, 2023

# WELCOME

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- **Thank you for coming to this meeting**
- **It is being recorded for those who couldn't make the meeting**
- **We will circulate the slides via email**
- **Please introduce yourself in the 'chat' and ask questions there**



# OUTLINE

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- **Steve Brine MP**  
Chairman, Health & Social Care Committee
  - Introduction
- **Mark Brooks OBE**  
Policy Public Advisor (Male Inclusion) & Chair: ManKind Initiative
  - What is the consultation?
  - What makes a good response?
- **Martin Tod**  
Chief Executive, Men's Health Forum
  - What are the topics?
  - Anything missing
  - Next steps

# STEVE BRINE MP

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**Chairman, Health & Social Care Committee**



# SELECT COMMITTEES

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- **Background:**
  - **House of Commons Select Committees examine, scrutinise and question the work of government departments.** They 'mirror' the departments.
  - **Consist of a minimum of 11 backbench MPs.** Cross-party but party membership mirrors the make-up of Parliament (currently all committees have a majority of Conservatives) BUT are independent so they are not controlled by the government or a government mouthpiece.
  - **Often MPs are subject matter experts and/or have a broad interests.** They choose to apply to be members. They are supported by a team of clerks employed by the House of Commons.
  - **They conduct a range of inquiries on subjects within their remit.** They then gather written and oral evidence (normally mirror the questions) – will take oral evidence from the Government at the end, produce a report with recommendations to the government who then must respond. The whole process can be a year or more.
  - **They are NOT the Government** so they try to influence the Government and broader policy making but the Government does not have to accept/act on the recommendations but they are taken very seriously. So keep up existing Government lobbying campaigns.
  - More information: <https://www.parliament.uk/about/how/committees/select/>
  - Last time there was an inquiry on men and boys 'issues specifically was an inquiry by the Women and Equalities Committee on men's mental health but this was 'interrupted' by the 2019 General Election: <https://committees.parliament.uk/work/124/mental-health-of-men-and-boys-followup/publications/>

# HEALTH AND SOCIAL CARE SELECT COMMITTEE



- **Who's Who?**

- |                            |                           |
|----------------------------|---------------------------|
| • Steve Brine MP           | – Conservative (Chair)    |
| • Lucy Allan MP            | – Conservative            |
| • Paul Blomfield MP        | – Labour                  |
| • Paul Bristow MP          | – Conservative            |
| • Martyn Day MP            | – Scottish National Party |
| • Chris Green MP           | – Conservative            |
| • Mrs Paulette Hamilton MP | – Labour                  |
| • Dr Caroline Johnson MP   | – Conservative            |
| • Rachael Maskell MP       | – Labour                  |
| • James Morris MP          | – Conservative            |
| • Taiwo Owatemi MP         | – Labour                  |

- **Do not lobby them direct on your submission - go through the Committee clerks**



# HOW TO RESPOND?

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- **Inquiry Page:**
  - <https://committees.parliament.uk/work/7858/mens-health/>
  - <https://publications.parliament.uk/pa/cm/written-evidence-guidance.htm>
- **Written evidence will be published (unless give good reason)**
- **Do's**
  - Keep what you write relevant to the subject of the inquiry. Answer the questions where you have expertise (there is no need to answer them all). **BUT BUT BUT** do not be confined by the questions. You can include broader men's health issues.
  - **Background:** Explain who you are and why you are sending us evidence (keep precise – do not use up valuable words – see later).
  - **Executive Summary and Recommendations:** At start (it may be the only thing that is read).
  - **Style:** Cross between a policy paper/academic paper (Guardian/Times written style) – so do not try to over-complicate language/ be precise/on-point. Use footnotes/sources.

# HOW TO RESPOND

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- Use active language not passive language
- Number paragraphs
- Break up sections clearly so it not one screed
- Demonstrate your expertise
- Do include case studies and/or international experience/research if relevant
- Put your evidence in a Word, ODT or RTF document (make sure the file is no more than 25MB in size) – not PDF
- Do tell clerks in covering email that you are content to give oral evidence (if you are content)
- Do make sure there are contact details on the submission



# HOW TO RESPOND

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- **Do's:**

- Do look at written evidence from other organisations to previous inquiries to see style:
  - **Prevention in Health and Social care:** <https://committees.parliament.uk/work/7205/prevention-in-health-and-social-care/publications/written-evidence/>
  - **NHS Dentistry:** <https://committees.parliament.uk/work/7140/nhs-dentistry/publications/written-evidence/>
  - **The Future of GPs:** <https://committees.parliament.uk/work/1624/the-future-of-general-practice/publications/written-evidence/>

- **Do contact the Clerks:** [hsccom@parliament.uk](mailto:hsccom@parliament.uk) / 0207 219 6182

# HOW NOT TO RESPOND

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- **DO NOT**
  - **WRITE MORE THAN 3,000 WORDS**
  - Send material that has already been published
  - Do not include logos
  - Do not 'graphic design it' albeit include graphs, tables, models etc
  - Do not publish your submission yourself. You have to wait until the Committee publishes it – then you can if you want.

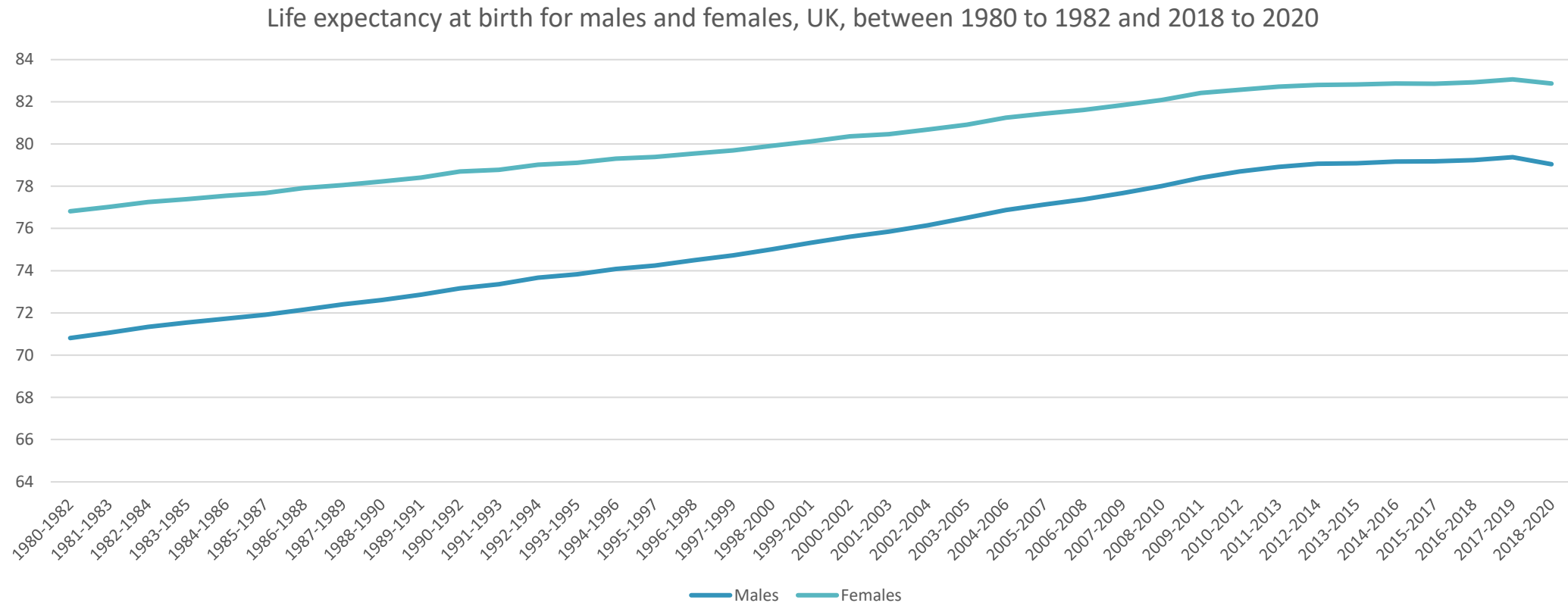
# THE TOPICS:

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- **Falling male life expectancy**
- **Cancer**
  - Early detection
  - Prostate cancer care
- **Higher rates of suicide amongst men**
- **Use of health services**
- **Community and sport-based projects**
- **Health equity across different population groups of men**



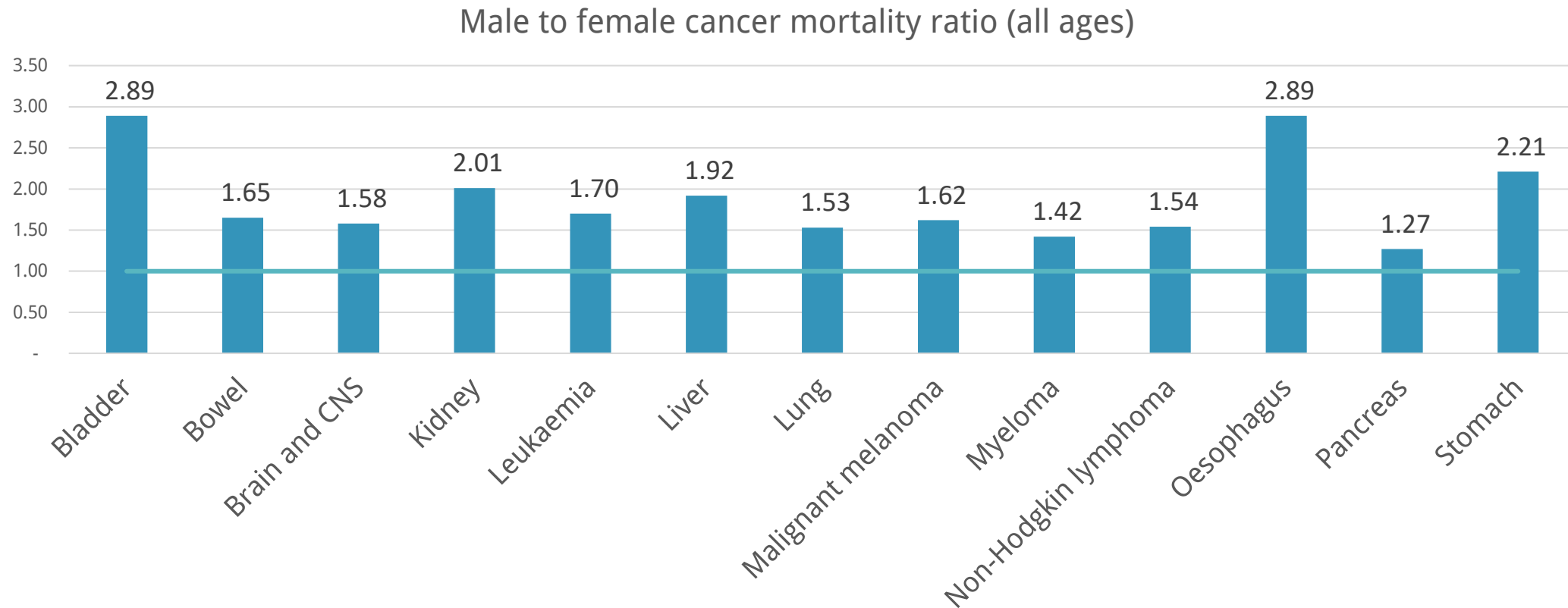
# WHAT FACTORS DRIVE LOWER, AND FALLING, MALE LIFE EXPECTANCY AND WHAT ACTION WOULD HAVE THE BIGGEST IMPACT ON ADDRESSING THIS?



ONS – National life tables – life expectancy in the UK: 2018 to 2020

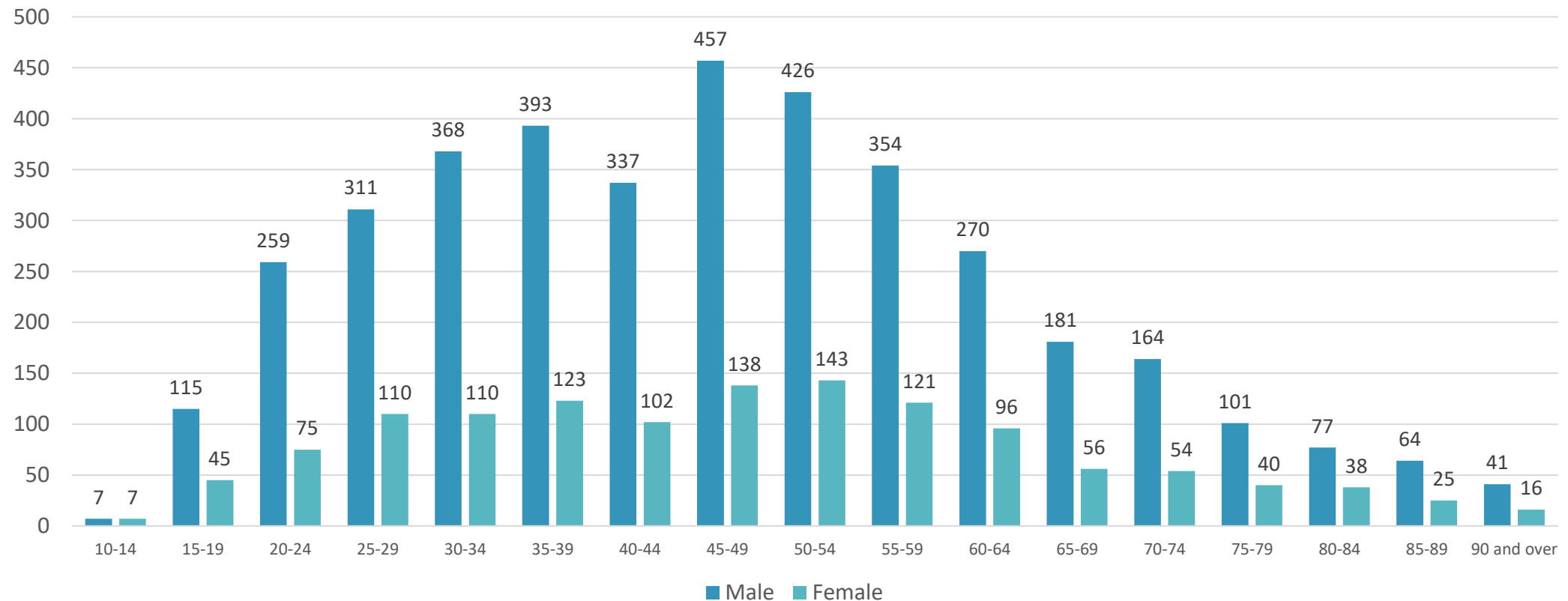
<https://www.ons.gov.uk/peoplepopulationandcommunity/birthsdeathsandmarriages/lifeexpectancies/bulletins/nationallifetablesunitedkingdom/2018to2020>

# WHAT IS KNOWN ABOUT WHY MEN HAVE A HIGHER RISK OF DYING FROM CANCER AND HOW CAN THIS RISK BE REDUCED?




Source: CRUK, Mortality rate ratios are European age-standardised, of male to female cancer mortality (excluding NMSC), UK, 2010.

# WHAT IS DRIVING HIGHER RATES OF SUICIDE AMONGST MEN AND HOW COULD THIS BE ADDRESSED?



Source: Suicides in England & Wales, 1981 to 2020 Registrations. ONS 2021

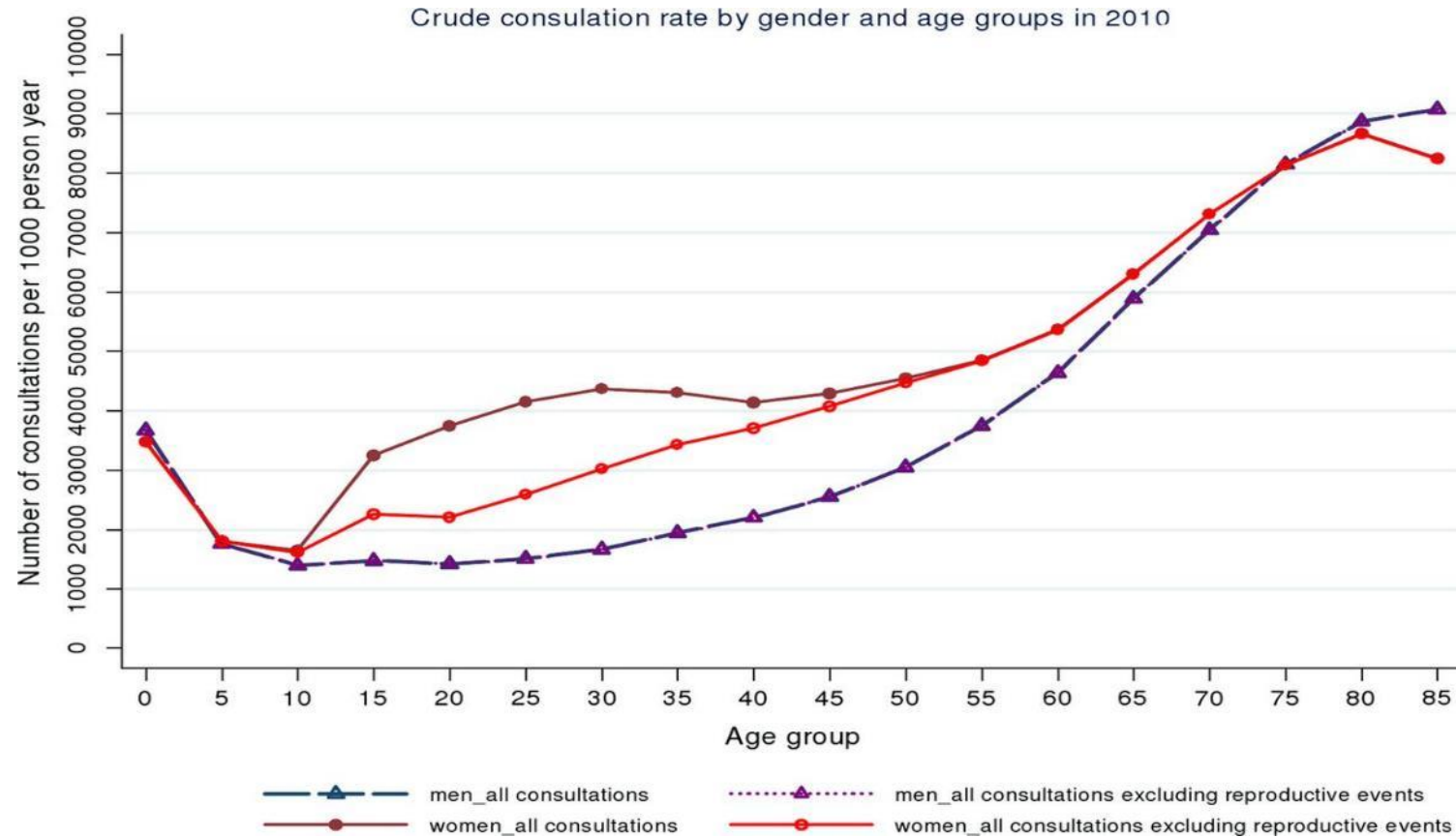
A cartoon illustration of a doctor's office. A doctor with a beard and glasses, wearing a white lab coat, sits at a desk with a computer monitor and a lamp. He is looking at a skeleton patient who is sitting in a chair. The skeleton is wearing a red and white striped shirt. A speech bubble from the doctor says, "You should probably have come a little earlier". In the background, there is a poster on the wall showing various human figures and a shelf with books and papers.

You should probably  
have come a little  
earlier

**WHAT FACTORS CONTRIBUTE TO MEN USING  
HEALTH SERVICES, LIKE GENERAL PRACTICE,  
LESS OFTEN THAN WOMEN...**



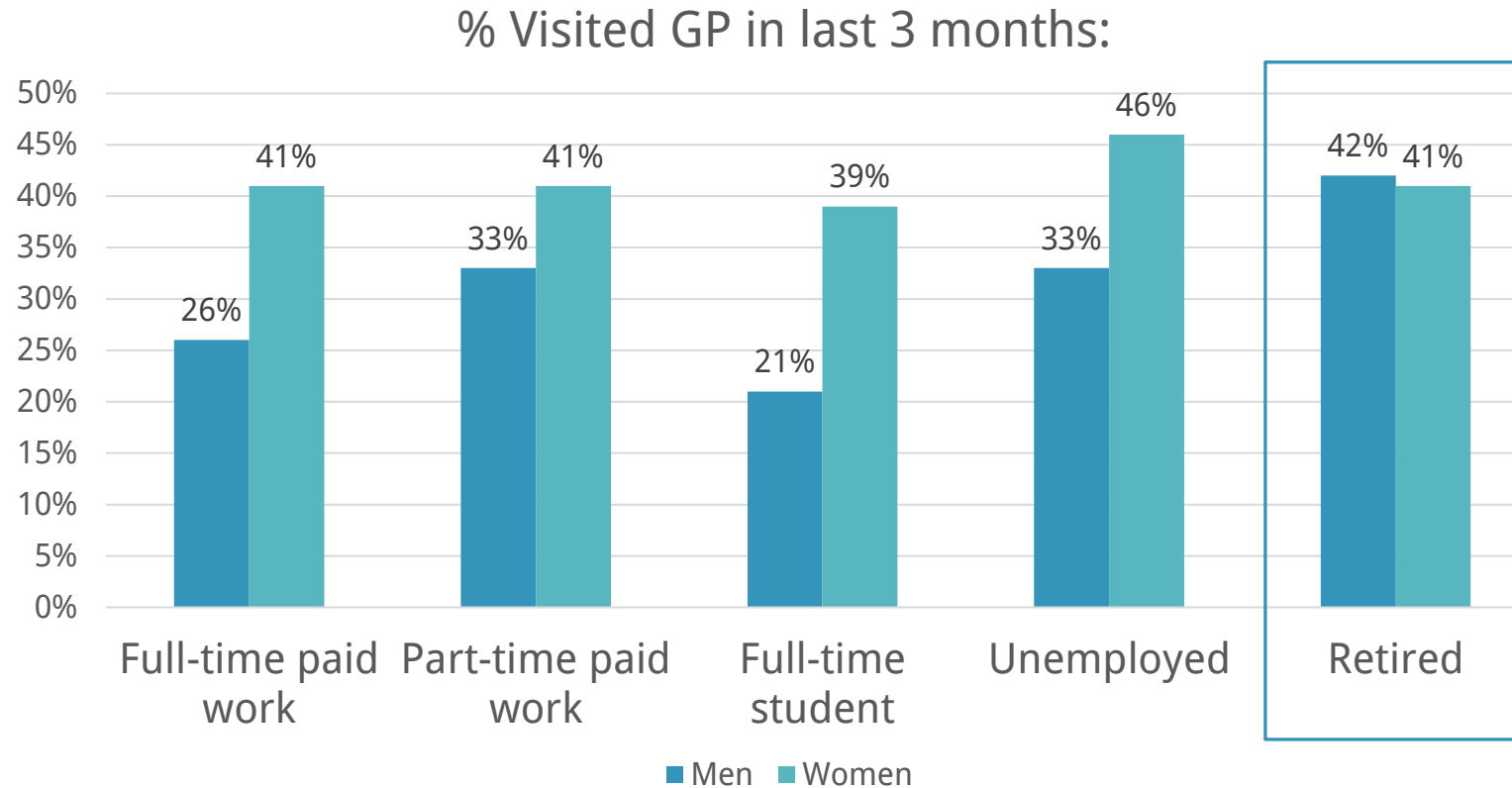
# WHAT FACTORS CONTRIBUTE TO MEN USING HEALTH SERVICES, LIKE GENERAL PRACTICE, LESS OFTEN THAN WOMEN...



Wang Y et al. *BMJ Open* 2013;3:e003320  
©2013 by British Medical Journal Publishing Group



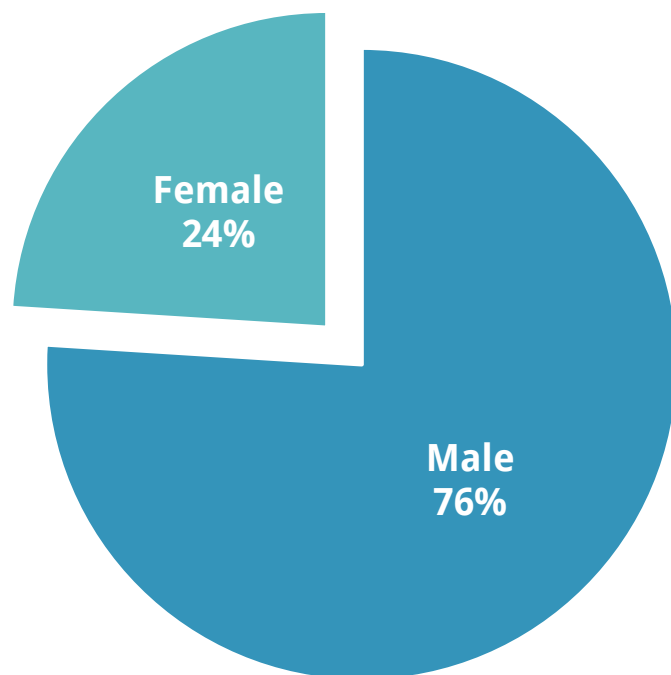
# WHAT FACTORS CONTRIBUTE TO MEN USING HEALTH SERVICES, LIKE GENERAL PRACTICE, LESS OFTEN THAN WOMEN...



Source: GP Patient Survey (2021 results)

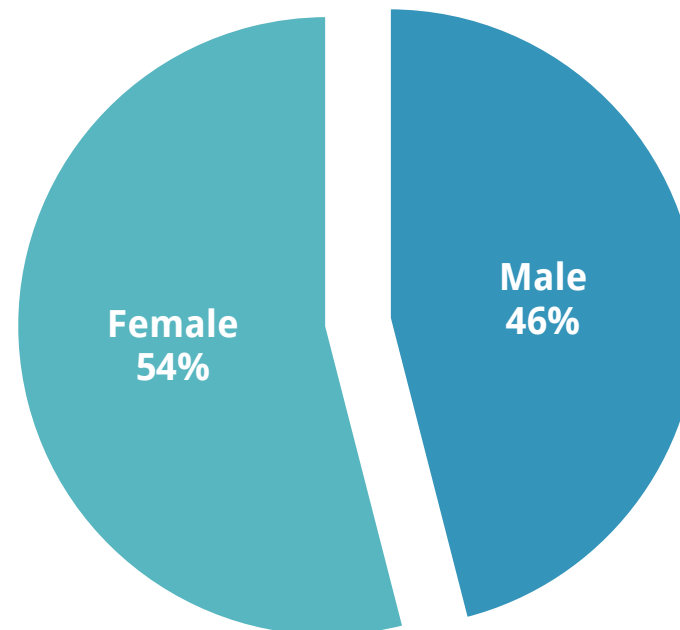
# ... AND WHAT IMPACT DOES THIS HAVE ON MEN'S HEALTH OUTCOMES, FOR EXAMPLE FROM CARDIOVASCULAR DISEASE?

CVD deaths under 65



ONS, E&W, 2021

NHS Health Checks



NHS Digital, NHS Health Check Programme, 2019

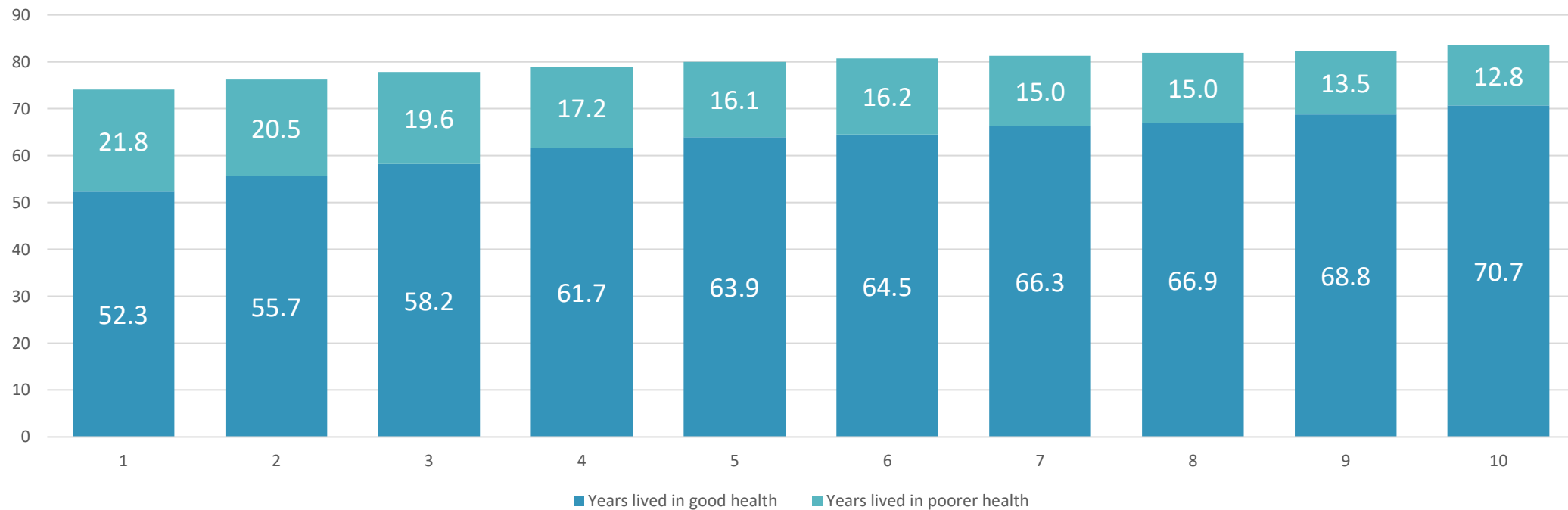


**WHAT ROLE DO COMMUNITY AND SPORT-BASED PROJECTS PLAY IN REACHING MEN AT HIGH RISK OF ISOLATION OR POOR MENTAL HEALTH, AND HOW CAN IT BE ENSURED THAT THIS SUPPORT IS SPREAD EQUITABLY ACROSS THE COUNTRY?**



# WHAT ARE THE CHALLENGES IN DELIVERING HEALTH EQUITY ACROSS DIFFERENT POPULATION GROUPS AMONG MEN AND HOW BEST CAN THEY BE ADDRESSED?

**Male: Healthy life expectancy at birth – by national deprivation decile**  
England, 2017 to 2019



ONS – Health state life expectancies by national deprivation deciles, England: 2017 to 2019

<https://www.ons.gov.uk/peoplepopulationandcommunity/healthandsocialcare/healthinequalities/bulletins/healthstatelifeexpectanciesbyindexofmultipledeprivationimd/2017to2019>

# THE QUESTIONS:

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- What factors drive lower, and falling, **male life expectancy** and what action would have the biggest impact on addressing this?
- What is known about why men have a **higher risk of dying from cancer** and how can this risk be reduced?
  - What action is needed to improve **early detection of cancers** specific to men, for example around awareness of symptoms, issues with screening and encouraging men to come forward?
  - With nearly half a million men living with or after **prostate cancer**, how well does aftercare support ongoing symptoms of male specific cancers and how could this be improved?
- What is driving **higher rates of suicide amongst men** and how could this be addressed?
- What factors contribute to **men using health services, like general practice, less often than women** and what impact does this have on men's health outcomes, for example from cardiovascular disease?
- What role do **community and sport-based projects** play in reaching men at high risk of isolation or poor mental health, and how can it be ensured that this support is spread equitably across the country?
- What are the challenges in delivering **health equity across different population groups among men** and how best can they be addressed?

# WHAT ARE THE GAPS?

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- **Social determinants?**
- **Social pressures and norms?**
- **Service design?**
- **Lack of a Men's Health Strategy**
  - Is the Government's 'Major Conditions Strategy' or 'Suicide Prevention Strategy' enough?



# NEXT STEPS

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- **Join the team:**
  - WhatsApp group - <https://chat.whatsapp.com/Gy0MeXI4AUf8YoqJr72InT>
- **For technical advice:**
  - [hsccom@parliament.uk](mailto:hsccom@parliament.uk)
- **For men's health content**
  - [inquiry@menshealthforum.org.uk](mailto:inquiry@menshealthforum.org.uk)
- **Let us know what you're doing**
  - A quick survey - <https://forms.gle/tPWpdnBWqKkeU8uV9>

